

**NONPROFIT CORPORATION
ARTICLES OF REVOCATION OF DISSOLUTION**

Wyoming Secretary of State
The Capitol Building, Room 110
200 W. 24th Street
Cheyenne, WY 82002-0020

Phone (307) 777-7311/7312
Fax (307) 777-5339
E-mail: corporations@state.wy.us

-
1. The name of the corporation is: _____
 2. The effective date of the dissolution was: _____
 3. The date that the revocation of dissolution was authorized: _____
 4. If the corporation's board of directors, or incorporators, revoked the dissolution, a statement to that effect: _____

 5. If the corporation's board of directors revoked a dissolution authorized by the members alone or in conjunction with another person or persons, a statement that revocation was permitted by action by the board of directors alone pursuant to that authorization.

 6. If member or third person action was required to revoke the dissolution, the information required by W.S. 17-19-1404(a) (v) and (vi). _____

Date: _____

Signed: _____

Title: _____

*(May be executed by Chairman of Board, President or
another of its officers)*

Filing Fee: \$10.00

Instructions:

1. The document shall be accompanied by one (1) exact or photo copy.
2. A copy of the Articles of Dissolution shall accompany this document.